

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.
10720790
APPLICANT(S)

FILING DATE
12-01-03

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2		/				
3		/				
4		/				
5		/				
6		/				
7		6				
8		/				
9		/				
10		/				
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12		/				
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44		/				
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46		/				
47		/				
48		/				
49		/				
50		/				
TOTAL IND.	2					
TOTAL DEP.	70					
TOTAL CLAIMS	72					

	IND	DEP	IND	DEP	IND	DEP
51		/				
52		/				
53		/				
54		/				
55		/				
56		/				
57		/				
58		/				
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						